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PTO/SB/01 (12-97)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	5991
	<b>First Named Inventor</b>	Sambasivan et al.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09/895,866
	<b>Filing Date</b>	June 29, 2001
	<b>Group Art Unit</b>	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	<b>OR</b>	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CONDUCTIVE AND ROBUST NITRIDE BUFFER LAYERS ON BIAXIALLY TEXTURED SUBSTRATES**

the specification of which (Title of the Invention)

☐ is attached hereto OR

☒ was filed on (MM/DD/YYYY) **06/29/2001** as United States Application Number or PCT International

Application Number **09/895,866** and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/217,157	07/10/2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 22922 OR  22922

☒ Registered practitioner(s) name/registration number listed below

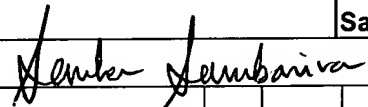
Name	Registration Number	Name	Registration Number
Rodney D. DeKruif	35,853		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label  22922 OR ☐ Correspondence address below

Name	Rodney D. DeKruif, Esq. Reinhart, Boerner, Van Deuren, Norris & Rieselbach, s.c.				
Address	1000 North Water Street				
Address	Suite 2100				
City	Milwaukee	State	WI	ZIP	53202
Country	United States	Telephone	414-298-8360	Fax	414-298-8097

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Sambasivan			Sankar		
Inventor's Signature				Date	11/26/01
Residence: City	Chicago	State	IL	Country	US
Post Office Address	2210 W. Arthur Avenue, #3				
Post Office Address					
City	Chicago	State	IL	ZIP	60645
Country	US				

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Amit		Goyal	
Inventor's Signature		Date	
Residence: City	Knoxville	State	TN
		Country	US
Citizenship US			
Mailing Address 300 Walker Springs Road, #19-E			
Mailing Address			
City	Knoxville	State	TN
		ZIP	37923-2617
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Scott A.		Barnett	
Inventor's Signature		Date 11/26/01	
Residence: City	Evanston	State	IL
		Country	US
Citizenship US			
Mailing Address 2722 Eastwood Street			
Mailing Address			
City	Evanston	State	IL
		ZIP	60201
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ilwon		Kim	
Inventor's Signature		Date 11/26/01	
Residence: City	Skokie	State	IL
		Country	US
Citizenship Republic of Korea			
Mailing Address 8532 Skokie Blvd., E2			
Mailing Address			
City	Skokie	State	IL
		ZIP	60077
		Country	US

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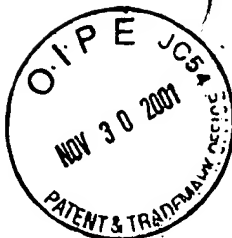
**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Donald M.		Kroeger	
Inventor's Signature		Date	
Residence: City	Knoxville	State	TN
		Country	US
Mailing Address		716 Villa Crest Drive	
Mailing Address			
City	Knoxville	State	TN
		ZIP	37923
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		ZIP	
		Country	
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Mailing Address			
Mailing Address			
City		State	
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		Country	

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.83)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	5991
	First Named Inventor	Sambasivan et al.
	<b>COMPLETE IF KNOWN</b>	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

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### CONDUCTIVE AND ROBUST NITRIDE BUFFER LAYERS ON BIAXIALLY TEXTURED SUBSTRATES

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Application Number [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable)

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

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60/217,157	07/10/2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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**DECLARATION — Utility or Design Patent Application**

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 22922 OR 

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Rodney D. DeKruif	35,863		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.Direct all correspondence to: ☒ Customer Number or Bar Code LabelOR ☐ Correspondence address below

Name	Rodney D. DeKruif, Esq. Reinhart, Boerner, Van Duren, Norris & Rieselbach, s.c.				
Address	1000 North Water Street				
Address	Suite 2100				
City	Milwaukee	State	WI	ZIP	53202
Country	United States	Telephone	414-298-8360	Fax	414-298-8097

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent based thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Sambasivan		Sankar			
Inventor's Signature				Date	
Residence: City	Chicago	State	IL	Country	US
Post Office Address	2210 W. Arthur Avenue, #3				
Post Office Address					
City	Chicago	State	IL	ZIP	60645
				Country	US

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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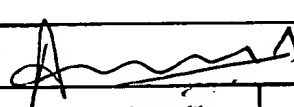
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Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Amit		Goyal	
Inventor's Signature 		Date 11/25/01	
Residence: City	Knoxville	State	TN
		Country	US
Citizenship US			
Mailing Address 300 Walker Springs Road, #10-E			
Mailing Address			
City	Knoxville	State	TN
		ZIP	37923-2617
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Scott A.		Barnett	
Inventor's Signature		Date	
Residence: City	Evanston	State	IL
		Country	US
Citizenship US			
Mailing Address 2722 Eastwood Street			
Mailing Address			
City	Evanston	State	IL
		ZIP	60201
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ilwon		Kim	
Inventor's Signature		Date	
Residence: City	Skokie	State	IL
		Country	US
Citizenship Republic of Korea			
Mailing Address 8532 Skokie Blvd., E2			
Mailing Address			
City	Skokie	State	IL
		ZIP	60077
		Country	US

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Donald M.		Kroeger	
Inventor's Signature <i>Donald M Kroeger</i>		Date <i>10-18-01</i>	
Residence: City	Knoxville	State	TN
		Country	US
Mailing Address 718 Villa Crest Drive			
Mailing Address			
City	Knoxville	State	TN
		ZIP	37923
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
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		Country	
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Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		ZIP	
		Country	

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